

PTO/SB/31

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| NOTICE TO APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES | | Docket Number 36856.404 |
| CERTIFICATE OF FACSIMILE TRANSMISSION I hereby certify that this correspondence is being transmitted to Group Art Unit 2817, 703-872-6318, addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. Date: October 21, 2003 | | In re Application of Hisatake OKAMURA et al. |
| | | Application Number 09/782,132 Filed February 13, 2001 |
| | | Title: DUAL MODE BAND-PASS FILTER |
| Christine M. Spivey | | Art Unit 2817 Examiner S. Jones |
| Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision of the examiner dated May 27, 2003. | | |
| The fee for this Notice of Appeal is (37 CFR 1.17 (b)) | | \$330.00 |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore the fee shown above is reduced by half, and the resulting fee is: \$ _____ | | |
| <input type="checkbox"/> A check in the amount of the fee is enclosed. | | |
| <input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. | | |
| <input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet. | | |
| <input type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 50-1353. I have enclosed a duplicate copy of this sheet. | | |
| <input type="checkbox"/> A Petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed. | | |
| WARNING: Information on this form may become public. Credit card information should not be included in this form. Provide credit card information and authorization on PTO-2038. | | |
| I am the | | |
| <input type="checkbox"/> applicant/inventor. | | |
| <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) | | |
| <input checked="" type="checkbox"/> attorney or agent of record. Registration Number 37,368 | | |
| <input type="checkbox"/> attorney or agent acting under 37 CFR 1.34(a) Registration number if acting under 37 CFR 1.34(a) . | | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*. | | |
| <input type="checkbox"/> *Total of forms are submitted | | |

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